

Lobster & Crab Harvesting 2007

Apprentice / Student Application

This form may be used to apply for or renew licenses. Please provide all information requested. Delays may result from incomplete applications..



Part A: Applicant Information

Name: _____
Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____ Birthdate: _____
Weight: _____ Height: _____ Sex: _____ Social Security #: _____
Hair Color: _____ Eye Color: _____
E-mail Address: _____
Maine Drivers License # _____

(If you have no drivers license, see back of form for requirements. If you are under 18, you **must** list parents drivers license #. If no license, explain why on the line below.)

Part B: Fishery Information

License Jan. 1, 2007 to Dec. 31, 2007
License fees are non-refundable.

	Renew	Fees
Apprentice under age 18	<input type="checkbox"/>	\$ 56
Apprentice age 18 and over	<input type="checkbox"/>	\$ 114
Apprentice over age 70	<input type="checkbox"/>	\$ 56
Student under age 23	<input type="checkbox"/>	\$ 56

(If 18 or older must show proof of being a full-time student.)

Declared Zone (A-G) Zone _____
(You **must** declare one zone in which you fish the majority of your lobster traps)

Zone(s) in which you intend to fish
A ☐ B ☐ C ☐ D ☐ E ☐ F ☐ G ☐
(You may not place any traps in a zone not selected above. You must fish a majority of traps in your declared zone)

Trap Tags (Students only)
Number of trap tags _____ at \$0.30 each \$ _____
Trap Tag Limits: Age 8 to 10 up to 10 tags
Age 11 to 13 up to 50 tags
Age 14 to 22 up to 150 tags

(All traps in use must be tagged. Student trap tag limit is 150. Allow up to 3 weeks for delivery.)
(Students only)

Buoy Color Pattern _____

(Students and Apprentices) You must have at least one sponsor.
Sponsors must hold a current commercial license.

Sponsor #1 License Number _____
Name _____

Boat Reg. Or Doc. Number _____
Boat Name _____
Declared Zone _____

Sponsor Signature _____

Sponsor #2 License Number _____
Name _____

Boat Reg. Or Doc. Number _____
Boat Name _____
Declared Zone _____

Sponsor Signature _____

Sponsor #3 License Number _____
Name _____

Boat Reg. Or Doc. Number _____
Boat Name _____
Declared Zone _____

Sponsor Signature _____

Part C: Supplemental Information

Fill out all information completely. False statements or misrepresentations will result in the revocation of the license and prosecution in Court. **Students list boat(s) you will be using to fish your tags.**

LOBSTER LICENSE # OF APPLICANT _____

Vessel 1: Boat Registration # / Doc # _____

Boat Owner's Name _____

Boat Length _____ Boat Name _____

Town of Primary Anchorage _____

of tags applicant is fishing from this boat _____

Vessel 2: Boat Registration # / Doc # _____

Boat Owner's Name _____

Boat Length _____ Boat Name _____

Town of Primary Anchorage _____

of tags applicant is fishing from this boat _____

(Tags must be designated to a specific boat, owner has priority over tag limits for boat, undesignated tags will be unregistered and not be used to fish. **If over boat limit for tags, explain why.**)

Part D: Certification

I hereby declare, under the penalty of perjury under the laws of the State of Maine and the United States of America that the foregoing information is true and correct and, if applying for a resident license, that I have read and understood the residency requirements listed on the back of this form and meet those requirements.

Today's Date ____/____/____
Month Day Year

Applicant _____
(signature of applicant)

Parent or
Guardian _____

(Applicants under 18 must have a parent or legal guardian who also meets the residency requirements sign this form)

Under Title 12, §6306, signature of applicant authorizes inspection by Law Enforcement Officers. Application on its face indicates compliance with Statutory criteria.

Instructions:

Complete the information in **Part A** on the front of this form. Check the license requested in **Part B** and calculate the total fees. Fill out all applicable information in **Part C**. Read the residency requirements included on this document and **certify your application with your signature in Part D**. Enclose this document in an envelope along with a check or money order payable to **Treasurer, State of Maine** or fill out the section below for **credit card payments**, affix a stamp and put it in the mail. **We cannot accept applications by fax or phone**. If you have questions call (207) 624-6550.

Check us out on the web! www.maine.gov/dmr

Mail to:
Licensing Division
Department of Marine Resources
21 State House Station
Augusta, ME 04333

Residency Requirements: Any individual who has been domiciled in Maine for the past 6 months preceding the date of application is eligible for a resident license. A corporation is eligible for a resident license if it has been created and exists under the laws of Maine and it has existed in Maine for 6 months preceding the date of application. A firm or partnership is eligible if all of its officers or partners have been domiciled in Maine for 6 months preceding the date of application. For the purposes of this license application, a resident is a person who:

- A. If registered to vote, is registered in Maine;
- B. If licensed to drive a motor vehicle, has made application for a Maine motor vehicle operator's license;
- C. If the owner of one or more motor vehicles located within the State, has registered at least one of the motor vehicles in Maine; and
- D. If required to file a Maine income tax return on the previous April 15th, filed a Maine income tax return.

Credit Card Payment: I authorize the State of Maine, Department of Marine Resources, Licensing

Division, to charge my VISA ☐ Mastercard ☐ Discover ☐ Card No. _____

In the Amount of \$_____, expiration date _____

Signed by cardholder _____ date _____

2006-11-21